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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	R /	TTORNBY DOCKET NO.	CONFIRMATION NO.
10/501,153 02/25/2005		Jarrod David Barker	0446-0165PUS1 5340			
TITLE OF INVENTION: FUE						
<u></u>	IALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE I	FEE TOTAL FEE(S) DUS	DATE DUE
nonprovisional	NO	\$1440	\$300	. 50	\$1740	06/04/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS]		,
GREENE, JASON M 1797		1797	095-055000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353). Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) stackhed. Tee Address form PTO/SB/12 stackhed. Tee Address' indication (or "Fee Address" indication form PTO/SB/14"; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the pattern front page, list (1) the names of up to 3 registered pattern atornous or agents OR, alternatively. (2) the names of a signed firm Onlying as a mornber a. 2 Kolasch & Birch, LL. 2 Kolasch & Birch, LL. 1 Editord pattern atomics or agents if no manue is 3.			
3. ASSIGNEE NAME AND RE	SIDENCE DATA T	O BE PRINTED ON T				
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a. Applicant claims SMA	LL ENTITY status.	See 37 CFR 1.27.	D b. Applicant is no los	ger claiming SMALL	ENTITY status. See 37 CI	FR 1.27(g)(2).
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